PART B -FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

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have its cown certificate of mailing or transmission. WOLE, GREENFIELD & SACKS, P.C. Foderal Reserve Plaza 600 Atlantic Avenue Boston, Massachusetts 02210-2206 APPLICATION NO. FILING DATE O9/776,479 02:02/2001 ROBERT L Brazzler O9/776,479 02:02/2001 ROBERT L Brazzler O9/776,479 02:02/2001 ROBERT L Brazzler O1/87,049 TITLE OF INVENTION: IMMUNOSTIMULATORY NUCLEIC ACIDS FOR THE TREATMENT OF ASTHMA AND ALLERGY APPLINATIVE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE Non-Provisional no \$1,510.00 \$300.00 \$1,810.00 \$1,810.00 \$0,606/2009 EXAMINER ART UNIT CLASS-SUBCLASS N. Mimnified 1645 1. Change of correspondence address or indication of Fee Orrespondence Address Smort PIO/SBI/123 statements (1) the mannes of up to 3 registered patent at more of a single firm of specific processing or agents OR, attement of a single firm of specific processing or agents OR, attemes of up to 3 mannes of 18 biol., no names of up to 3 mannes of 18 biol., no names of up to 3 mannes of 18 biol., no names of up to 3 mannes of 18 biol., no names of up to 3 mannes of 18 biol., no names of up to 3 mannes of 18 biol., no names of up to 3 mannes of up to						Fee(s) Transmittal. This certificate cannot be used for any other accompanying			
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APPLICATION NO. FILING DATE FRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/776,479 02/02/2001 Robert L Brazzler C1037,70013US00 7139 TITLE OF INVENTION: IMMUNOSTIMULATORY NUCLEIC ACIDS FOR THE TREATMENT OF ASTHMA AND ALLERGY APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE Non-Provisional no \$1,510.00 \$300.00 \$1,810.00 \$6606/2009 EXAMINER AT UNIT CLASS-SUBCLASS N. M. Minnifield 1645 1. Change of correspondence address (or Change of Correspondence address or indication of "Fee Address" (17 (FR) 136). (1) the manse of up to 3 registered patent from the pat	Boston, Massachusett	s 02210-2206							
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Please check the appropriate assignee category or categories (will not be printed on the patent): Individual X Corporation or other private group entity Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): X Issue Fee A check in the amount of the fee(s) is enclosed. X Publication Fee (No small entity discount permitted) Payment by credit card. Form FTO 2038 is attached. Advance Order # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23/2825 5. Change in Entity Status (from status indicated above) A payment of Fee (No small entity discount permitted) Payment in the Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23/2825 5. Change in Entity Status (from status indicated above) A payment of Fee (No small entity Status See 37 CFR 127 by Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 127(g)(2). The Director of the USITO is requested to apply the Issue Fee and Publication Fee (If required) will not be accepted from anyone other than the applicant; a registered attorney or agent, or the assignee or other party in interest as shown by the records of the USITO (Spates Patent and Tradecages (Office.) Authorized Signature Date 1 June 8, 2009									
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